such reactions are comparatively readily induced with typhus blood.* Baehr, Plotz and Olitzky 5 explain this fact by the assumption that the bacilli rapidly lose their virulence when grown artificially, even in the original culture taken directly from the blood of the typhus patient. There is another explanation which suggests itself; namely, that in typhus blood the bacilli, though few in number, are fortified with anti-immune bodies (probably present in large quantities before the crisis), which protect the organisms against the natural immunity forces in the new host and thus enables them to multiply and cause the disease. On the other hand, a suspension of bacilli taken from an artificial culture, being free from anti-immune bodies, are quite rapidly destroyed by the natural immunity of the new host. The fact that the organisms disappear from the blood of a patient within 24 to 36 hours after the crisis speaks in favor of this theory, as it illustrates the rapidity with which the bacilli are destroyed when the balance of immunity is on the side of the host. It is probable that if the bacilli were suspended in filtered typhus blood taken at the height of the disease and then injected into a susceptible animal, they might then cause the typical typhus reaction with greater regularity, the bacilli now being protected by the anti-immune bodies in the filtered serum. This anti-immune bodies in the filtered serum. This suggestion is made with the hope that workers who have an opportunity to study typhus cases may try this simple experiment and thus may possibly help finally to solve the important problem

sibly help finally to solve the important problem of the etiology of typhus exanthematicus.

*In two instances Baehr, Plotz and Olitzky were successful in obtaining a reaction in guinea pigs following the injection of cultures of bacillus typhi exanthematici obtained from two epidemic cases (Jour. Infec. Dis. 1915 17, 1, pp. 52-56). Unfortunately both of these animals died before the exact nature of these reactions could be determined by immunity studies. Olitzky. Denzer and Husk.6 in their more recent studies in Mexico, found that "the injection into a guinea pig of a colony taken directly from the blood culture tube proved the organism to be pathogenic." But in this instance, too, apparently no immunity studies were possible on account of the sudden interruption of the work.

- 1. Brill.
- Brill. N. E.: Am. Jour. Med. Sc., 1910, XXXIX, 484-502.
 Brill. N. E.: Am. Jour. 37 Brill, N. E.: Am. Jour. Med. Sc., 1911, CXLII, 196-218.
- Anderson and Goldberger: Public Health Rep., 1912, 27, p. 149.
 Plotz, Harry: Jour. Am. Med. Assn., 1914, 62, p.
- Plotz, Olitzky and Baehr: Jour. Infect. Dis., 1915,

- Ditzky. Denzer, and Husk: Jour. Am. Med. Assn., May 27, 1916, p. 1692. Editorial Jour. Am. Med. Assn.: June 3, 1916, p. 1782.

University of Oregon, Department of Medicine, Portland, Oregon.

SULPHUR AS A REMEDY FOR RHEUMATISM.

By W. F. McNUTT, Sr., M. D., San Francisco.

According to the London Lancet, February 6th, 1915, Sir Lauder Brunton made a discovery, accidentally, however, viz: that sulphur is a potent remedy in rheumatism. Sir Lauder had a patient with rheumatism in the hand which his remedies failed to cure. A friend of the patient's, a kindly old lady of course, told her to put sulphur in her stockings, which she did, and her rheumatism was completely cured. Sir Lauder expressed surprise, not only that the sulphur in her stockings cured the patient, but that the silver bangles that the

verily there is nothing new under the sun. It Sir Lauder had consulted Dr. H. W. Fuller's old work, London Edition, 1825, on rheumatism, rheumatism, rout matic gout and sciatica, he would have found sulphur highly recommended for these diseases. Fuller states that it was then an old domestic

remedy in the north of England for the diseases. I have many times used it with excellent results in sciatica, by taking a long flannel bandage, rubbing the sulphur into it as one would plaster of paris in a mesh bandage, and wrapping the whole leg. Any silver article in the pocket or ornament worn by the patient will be blackened in 48 hours. The absorbed sulphur eliminated by the skin and bowels is the sulphide; that eliminated by the kidneys is the sulphate.

SOCIAL INSURANCE COUNTY COMMITTEES.

Alameda County—Dr. H. S. Delamere, chairman; Dr. F. H. Bowles, Dr. H. A. Makinson.
Butte County—Dr. Edw. E. Baumeister, Dr. N. T. Enloe, Dr. J. O. Chiapella.
Los Angeles County—Dr. Wm. Wenzlick, chairman; Dr. J. Ross Moore and Dr. T. Percival Ger-

Mendocino County—Dr. L. C. Gregory, Dr. Oswald H. Beckman, Dr. H. O. Cleland, Dr. S. L. Rea, Dr. E. H. Sawyer.

Stanislaus County—Dr. Delappe, Dr. E. V. Falk. -Dr. B. F. Surryhne, Dr. F. R.

Delappe, Dr. E. V. Falk.
Sacramento County—Dr. E. M. Wilder, chairman;
W. A. Beattie and J. P. Dillon.
San Bernardino County—Dr. G. G. Moseley, Dr.
Carroll C. Davis, Dr. C. G. Hilliard.
San Diego County—Dr. Homer C. Oatman, Dr.
R. J. Pickard, Dr. Harry Wegefarth, Dr. P. M.
Carrington, Dr. R. L. Doig.
San Francisco County—Dr. John H. Graves, chairman; Drs. Rene Bine, F. W. Birtch, F. B.
Carpenter, A. W. Hewlett, T. W. Huntington, J.
H. O'Connor. Langley Porter. H. O'Connor, Langley Porter.

San Joaquin County—Dr. L. Dozier, chairman; Dr. Mary Taylor, C. F. English.
Orange County—Dr. H. M. Robertson, Dr. J. I. Clark, Dr. A. M. Weedie.

Santa Cruz County-Dr. J. M. Gates, Dr. Keck, Dr. E. E. Porter.

Sonoma County-R. M. Bonar, J. W. Cline, N.

R. H. Juell. Tulare County—A. W. Preston, J. T. Melvin, R.

Ventura County—Dr. D. W. Mott, Dr. C. A. Jensen, Dr. B. E. Merrill, Dr. H. B. Osborn.
San Mateo County—Dr. A. L. Offield (chairman), San Mateo, Cal.; Dr. J. L. Ross, Redwood City, Cal.; Dr. A. R. Moodie, Redwood City, Cal.

Committee on State Industrial Accident Laws.

Los Angeles County-Dr. Wm. R. Moloney, chairman; Dr. E. H. Southworth and Dr. C. P. Thomas.

SOCIETY REPORTS

ALAMEDA COUNTY.

Following is a report of meetings held during November:

November 10th.

Dr. Bowles, chairman.

I. Diagnosis and treatment of acidosis, especially in diabetes. Dr. Albert H. Rowe.

II. Management of control ward N. Ewer.
III. The care of the breasts. Dr. Dudley Smith.

Regular monthly meeting. Program arranged

by Dr. Dudley Smith.

I. The relief of pain in labor. Dr. Dudley Smith.

II. Present status of gas-oxygen anesthesia and twilight sleep. Dr. F. W. Lynch, San Francisco.

III. Technic of gas-oxygen administration in labor. Dr. Florance Sulvector.

III. Technic of gas-oxygen administration in labor. Dr. Florence Sylvester.

IV. The application of anoci-association to obstetrics. Dr. Carl L. Hoag, San Francisco.

E. E. BRINCKERHOFF, Secretary.

FRESNO COUNTY.

October Meeting.

The regular monthly meeting of the Fresno County Medical Society was held on the evening of October 3, 1916, in the offices of Drs. Anderson, Pettis, Schottstaedt and Benedict. Dr. Willson,

president, presided.

Present: Drs. Mathewson, Schottstaedt, Benedict, Boyd, Yates, Mitchell, S. M. Long, Thompson, Petersen, McKenney, Miller, Walker, Dixon, Foster, Willson, Pettis, Couey, Aiken, G. L. Long, G. A. Hare, Sweet and Staniford.

The application of Dr. J. A. Gillespie of Kingsburg for membership in the society was read, and referred to the Committee of Censors before being sent to the secretary of the State Society for consideration.

The usual monthly bills were ordered paid.

The Milk Committee, through its chairman, Dr. Aiken, reported that Fresno would have a certified

milk supply within very short time.

A committee of three was appointed to draw up A committee of three was appointed to draw up resolutions in respect to Dr. J. A. Rosenberger, who was recently killed by the overturning of his automobile. Dr. Rosenberger had been a practitioner of Fresno County for twenty-two years. The president appointed Drs. J. R. Walker. C. O. Mitchell and G. L. Long to draw the resolutions. It was moved, seconded and carried that Dr. C. O. Mitchell be appointed by the society as a visiting member of the staff of the tubercular clinic.

clinic.

Moved, seconded and carried that a committee of two be appointed to solicit the support of the members of this society toward the proposed State

Indemnity Insurance organization.

Dr. Frank Hinman of San Francisco was the guest of the evening and gave a most interesting and instructive talk upon the subject. "Urological and instructive talk upon the subject. "Urological Diagnosis in General Practice." Dr. Hinman Diagnosis in General Practice." Dr. Hinman showed a number of lantern slides and reproductions of pyelograms. He also showed a number of interesting gross pathological specimens of the urinary tract, most of these being unusual specimens of kidney stone.

The invitation of Drs. Trowbridge and Cravcroft to meet in their offices for the November meeting was accepted.

meeting was accepted.

After the usual social hour with refreshments, the meeting adjourned.

November Meeting.

The Fresno County Medical Society held the regular November meeting on the evening of the 7th in the offices of Drs. Trowbridge and Craycroft. Dr. Willson, president, presided.

Minutes of previous meeting read and approved. Roll call: Petersen, Butin, Thompson, S. M. Long, Jones. Pettis, Wilson, Foster, Aiken, Dixon, Manson, Barr, Hayden, Couey, Nicholson, Miller, Craycroft, Mathewson, Benedict, McConnell, Morgan, Mitchell, Staniford, and Drs. Howard Ruggles and Wm. Behlow of San Francisco as guests. Wm. Behlow of San Francisco as guests.

Transaction of routine matters. It was announced that Dr. I. M. Rubinow, consulting actuary of the Social Insurance Commission, would speak to the members of the society on the evening of

November 15.

A committee of three was appointed to draw resolutions out of respect to the late Dr. E. C. Dunn. Drs. T. M. Hayden, W. T. Barr and Geo.

H. Aiken were appointed.

Dr. Howard Ruggles of San Francisco showed a large number of X-ray pictures of the chest in illustration of the subject, "X-ray Diagnosis of the Chest." This series of pictures was indeed instructive and everyone felt indebted to Dr. Ruggles for going to the trouble of bringing this large collection of plates with him. Dr. Behlow was with Dr. Ruggles, and we hope that they will be good enough to visit us at another time.

After refreshments, the meeting adjourned. KENNETH J. STANIFORD,

Secretary.

IN MEMORIAM.

WHEREAS, An allwise Providence has seen fit to remove from our membership Dr. J. A. Rosenberger, one of our senior members, a physician of Fresno County for twenty-two years, and a capable brother practitioner; therefore be it

RESOLVED, By the Fresno County Medical Society, in session assembled, that this society express regret at the loss of one of its members and extend the sympathy of this body to the widow and family; and that this resolution be spread on the minutes, and that a copy be forwarded to the widow in token of our respect and esteem.

(Signed) J. R. WALKER, C. O. MITCHELL, G. L. LONG, Committee.

IN MEMORIAM.

Dr. E. C. Dunn located in Fresno in the spring of 1889. He was secretary of the U.S. Board of Pensions for several years. He immediately affiliated with the Fresno County Medical Society, once or twice its honored president, and until failing health began, he was an active and constant attendant on its meetings. At the time of his death he was a member of the American Medical Association, State, and County Medical Societies. Dr. Dunn stood for all that is highest and noblest in the medical profession, more than all else, he prized the confidence and esteem of to the practitioners. He was ever faithful to the ancient tenets of his profession, strictly ethical, and honorable to a fault. He was not only a skillful physician and surgeon, but also a high-minded, honorable gentleman of the old school.

WHEREAS, It has pleased the Almighty in His infinite wisdom, to remove from our ranks our friend and fellow physician, Dr. E. C. Dunn, one whom we always esteemed for his high professional attainments; therefore be it

RESOLVED, That we, the members of the Fresno County Medical Society, express our deep sorrow at the loss of this member, whose companionship we sadly miss.

RESOLVED. That we tender our sincere sympathy to the members of the family into whose lives this sorrow has come; and be it further

RESOLVED, That a copy of these resolutions be sent to the family of the deceased, that a copy be inserted in the State Journal, and a copy be placed in the minutes of the Fresno County Medical Society.

(Signed) T. M. HAYDEN, W. T. BARR. GEO. H. AIKEN, Committee.

KERN COUNTY.

Regular November meeting called to order by Dr. A. I. Fraser, in the new quarters of the society in the City Hall, with the following members present: Drs. S. F. Smith, C. S. Compton, T. M. McNamara. F. A. Hamlin, J. A. Copeland, W. P. Scott, C. W. Kellogg, C. A. Morris, Jin W. Hull,

W. H. Cook, G. H. Bahrenberg, F. Crease, H. Rogers, G. H. Shrodes and F. J. Gundry.

A committee of three, Drs. S. F. Smith, F. A. Hamlin and J. H. Copeland, were appointed to make arrangements for the annual banquet, December 15.

Paper of the evening, prostatectomy, with lantern slides and specimens, by Dr. D. W. Dakin of Los Angeles, with discussion by members. Adjourned. F. J. GUNDRY, Secretary.

RIVERSIDE COUNTY.

The regular monthly meeting of the Riverside County Medical Society was held December 11, 1916, at the Elks' Club, Riverside. The following program was presented:

"Medical Legislation," Dr. John C. King, of Banning, Cal.

"The Therapeutics of Hexamethylamine," Dr. Paul E. Simonds, of Riverside.

Officers elected for the year 1917 were:
President, Dr. W. S. Davis, of Corona.

Vice-President, Dr. R. E. Moss, of Riverside.
Secretary-Treasurer, Dr. A. E. Strong, of Riverside.

SACRAMENTO SOCIETY.

The regular November meeting of the Sacramento Society for Medical Improvement was called to order at 8:30 p. m. by Vice-President J. W.

Minutes of previous regular and special meetings read and approved.
Cases reported: None.
Paper of the evening: Some Aspects of Treatment of Poliomyelitis, read by Harold W. Wright, M. D., of San Francisco.
Discussion opened by Dr. A. M. Henderson.

M. D., of San Francisco.

Discussion opened by Dr. A. M. Henderson.

Discussed by Drs. E. Pitts, J. Parker Dillon,
G. A. Foster, closed by Dr. Wright.

A. L. Munger elected to membership.

Report of Board of Directors read.

Adjourned at 10:30 p. m.

F. F. GUNDRUM, M. D.,

Socretary Treesurer

Secretary-Treasurer.

PROCEEDINGS OF THE SAN FRANCISCO COUNTY MEDICAL SOCIETY.

During the month of November, 1916, the following meetings were held:

Section on Medicine.

General Meeting.

Tuesday, November 14, 8:30 P. M.

1. Demonstration of Cases.......G. E. Ebright
A. Tumor of Mediastinum.
B. Case of Amebic Dysentery in Man
who has never been out of California.

2. A Question of Ethics; What Constitutes

Proper Dismissal of a Physician?.....

The Value of Intravenous Injections of Colloidal Solutions in Hemorrhage.....

H. Hurwitz

Section on Surgery.

Tuesday, November 21, 8:30 P. M.

Obstetrical Meeting.

1. Eclampsia—What is it?.....F. W. Lynch
2. The Prophylaxis of Eclampsia...R. K. Smith
3. The Treatment of Eclampsia...A. B. Spalding

Owing to the death of Dr. Jones, the meeting of the Eye, Ear, Nose and Throat Section was not held on November 28.

SAN JOAQUIN COUNTY.

The regular monthly meeting of the San Joaquin County Medical Society was held in the Chamber of Commerce quarters Friday evening, Chamber of Commerce quarters Friday evening, November 24th. Those present were: Drs. F. P. Clark, Margaret Smyth, L. Dozier, A. E. Edgerton, G. W. Walker, B. F. Walker, W. J. Young, H. J. Bolinger, Minerva Goodman, C. F. English, R. T. McGurk, W. Priestly and D. R. Powell, with Dr. Harold Wright of San Francisco and Dr. Musgrove as guests.

After a business session and nominations for the Board of Directors for 1917, the president introduced Dr. Wright, who read a paper on "Obstetrical Paralysis, Its Causes and Treatment." The doctor's paper was very complete and was appreciated by all the members present, many of whom joined in the discussion at its conclusion

whom joined in the discussion at its conclusion. The meeting adjourned at 10 p. m.

DEWEY R. Powell, Secretary.

LOS ANGELES COUNTY. Eye and Ear Section.

The regular meeting of the Eye and Ear Section was held in the office of Dr. Hugo Kiefer, Brockman Building, November 6, 1916. Attendance: Drs. Bullard, Brown, Dudley, Detling, Fleming, Griffith, Graham, Harris, Kress, Lefler, Montgomery, Stivers, Swetman, Tholen, True, Kiefer and Kelsey. Visitors: Drs. Gage, Sleeper, Hoemer and Jesberg.

Minutes of previous meeting read and corrected at the suggestion of Dr. Kress as follows:

In Dr. Harris' case mention was made that a certain patient was reported by him at the last meeting as having been neglected at the County Hospital. Dr. Kress wished to state that the patient was examined by several specialists, among them Drs. Bogue, Jesberg, Brown, McCoy and Old, and given proper diagnosis and treatment. Dr. Harris replied he was merely quoting what the patient told him.

Report of Cases.

Dr. Bullard: Case of trauma of the eye, a cut two-thirds across the cornea, some loss of aqueous humor; treated two weeks with heat.
2nd case. An ulcer of the cornea, treated with

3rd case. An ulcer of the cornea, treated with heat and yellow oxide of mercury ointment.

Dakins' solution used in one case of profuse discharge; disappeared after fourth washing.

Dr. Harris: Case unique in my practice. Total absence of the iris in either eye, a supra-luxation of either lens. He wears bifocals and strong magnifying glasses, doing school work and keeping up with his classes, also has bipolar cataract and nystagmus; prognosis is bad.

Dr. Kiefer showed specimen of post-nasal polynomials and strong magnifying glasses.

Dr. Kiefer showed specimen of post-nasal polyp from the posterior end of the septum, an unusual location, and removed by snaring. History of one year of nose blocking, no nasal discharge, no pain, polyp pedunculated, by raising palate could see it

from mouth. Dr. Kress: Reported case of women practically blind in both eyes. The patient, a woman of 45, gives the history of having had good vision in each eye up to two days ago. At that time trouble started in the right eye, with a sensitiveness as if there was something scratching. She does not remember the details other than that the inflammation subsided without any special pain or distress, and without any particular loss of vision. At the end of several months there was a recurrence in the same eye, and before the trouble had sub-sided, the left eye became inflamed, which condition continued until about a year ago, when vision was lost to about the same extent as at present. During the last year she has not been under the care of physicians, although during these inflammatory attacks she was under supervision. She presented herself at the clinic the other day, and an examination showed a right globe that had a minus 2 tension, and a left globe that had a plus 2 tension. The chambers in each eye were very shallow, especially so in the right, and the iris of the right was seemingly very friable and atrophic. There did not seem to be any pigment at the iris edges, but the pupil has not been dilated. The lenses in each eye are cataractous, but there is no exudate present. The cornea of the right eye shows a scar from an old ulcer. The right eye has evidently undergone degeneration. Whether the condition arose as a result of a glaucomatous condition, or whether there was an inflammation of the uveal tissue, is a question. It would be interesting to obtain from the physicians who attended her more definite history.
Dr. Detling's discussion of Dr. Kress' case: The

important point in the etiology was a question whether it was tuberculosis or leutic, there might have been an ulcer with perforation and uveitis in the right eye and the left eye involved by

Dr. Graham's discussion: I thought it glau-

comatous.

Dr. Kelsey's discussion: I had a case similar in features, had large perforation ulcer, pain was relieved suddenly in the night.

Dr. Lefler's discussion: I think the case was

iridocyclitis.

Dr. Montgomery showed three specimens of

polypi.

1st case. Post-nasal polypi from boy of 11, used cocaine in operation, removed polyp. It sprang from the posterior ethmoidal cells and showed

below level of the soft palate.

2nd case. Boy of 16. Polyp removed from nose; had been cauterized by another physician and

necrosis had set in.

3rd case. Polyp protruded in the ant- and post-

nares and in the throat.

All three cases proved extremely easy of removal by the following technic: First shrink down mucosa and with cocain find spot of attachment of the pedicle, then place curved tonsil knife around the base and with sawing motion and no traction cut off the polyp and its base. I am opposed to pulling out polyps from nose. The tonsil knife should be very sharp and set at an angle to the handle.

Report of the Membership Committee.

The application of B. C. Davies being favorably reported by the secret membership committee, a written secret ballot was taken. The chairman appointed Drs. Griffith and Graham tellers.

Result: Votes cast, 11, Favorable, 11. Dr.

C. B. Davies declared elected.

New Applications.

Dr. C. M. Hosmer of San Diego was received and referred to the secret membership committee. The following communication from the secretary of the Los Angeles County Medical Association was received November 6, 1916:

"To the Eye, Ear, Nose and Throat Section, Care Dr. C. G. Stivers, Secretary, 503 Auditorium Bldg.,

Los Angeles, Cal. Gentlemen:

I call your attention to the fact that among the

list of applicants for membership in the Los Angeles County Medical Association are three eye, ear, nose and throat specialists; namely, Drs. Curtis M. Beebe, W. Fred Stahl and Simon Jes-

The Membership Committee has been requested to forward these applications to you before taking action thereon. Very truly yours,

GEO. H. KRESS, Secretary."

After free discussion of the advisability of taking definite action in regard to applicants the following motion to amend was received from Dr. Kress:

Amendment to Article III of Section 7.

The rule of procedure in regard to eye, ear, nose and throat specialists who apply to the Los Angeles County Medical Association for general member-ship, and whose applications are then referred by the board of Council of the society at large, to this section, as regards eligibility, shall be as

Such applications referred to this section shall be transmitted by the section secretary to the secret membership committee of this section. That committee shall then recommend or not recommend and so report to this section. A written yes or no ballot shall then be taken on the adoption of the membership committee's report. A majority shall decide.

This action of the section shall then be sent to the secretary of the Los Angeles County Medical Association, by him to be transmitted to the secret membership committee of that society.

It is expressly understood that recommendation, or rather willingness, to permit an applicant to become a member of the Los Angeles County Medical Association at large, does not obligate this section to necessarily vote such specialist into membership in this section, should he later apply thereto.

Unfinished Business.

The chairman of the executive committee stated that they had decided to dispense with the joint meeting with the Los Angeles County Medical Association for this year.

Discussion by Drs. Kress, Graham, Fleming, Dudley, Kelsey, True, Stivers and Detling. The consensus of opinion being that it would be best to dispense with the joint meeting.

Dr. Fleming moved that the report in regard to the joint meeting with the Los Angeles County Medical Association be accepted. Seconded by Dr. Dudley. Carried.

December 4, 1916.

Dr. Grant Selfridge read a paper entitled, "Demonstration of Intra-Nasal Cosmetic Surgery," with colored lantern slides. He said, in part, that the correction of nasal deformities was of great importance both from a cosmetic and physiological standpoint, all his work had been done intranasally and he had utilized bone and cartilage grafts, sometimes from the septum and sometimes from the rib and scapula. The first incision is made inside the nostril between the skin and mucous membrane and outer surface. He separates freely all tissues up to the frontal bone. The graft of bone and cartilage from the rib should be removed by an assistant, and its removal timed to arrive when the nose is ready for it, so as to avoid curling up of the edges. For this reason, the graft should never be put in a salt solution as it causes curling. Over correction is not a fault to be avoided as there is considerable shrinkage in the tissues. After the operation the bone

and cartilage graft should be split and the meduland carmage grait should be split and the medularly substance removed. Periosteum and perichondrium should be preserved as the graft will be more apt to grow in its new location with the natural covering than without. Sutures are often used in the nose and serve to hold the graft in place. Photographs of the nose are made both in profile and full face and rediographs are used to profile and full face and radiographs are used to show the result of the grafting. The external dressing should receive special care. The application of adhesive straps passed from one side of the nose to the other and around the tip of the nose serve to preserve the shape. Intra-nasal nose serve to preserve the shape. Intra-nasal splints are not used, but an external splint of table-felt soaked in silicate of soda serves to keep the nose in position. Syphilitic patients should not be operated upon as the bones are already diseased and liable to undergo further thange. The very large posses of the Universe. change. The very large noses of the Hebrew type may be made smaller by removing a section of the septum, and collapsed alae may be corrected by grafting or in case of excessive tissue by taking out a buttonhole section and bringing the edges together and applying sutures.

Discussion.

Dr. Kyle: I have tried this work in several cases, and I am very glad Dr. Selfridge is doing the work and doing it so well. In regard to the X-ray, it is very valuable as a means of diagnosis and I use it frequently. One interesting case I had was saved from a mastoid operation by having an X-ray picture taken. It showed no mastoid involvement so no operation was done. Stereoscopic pictures are valuable especially in sinus work. One can tell if pus is present and its level or whether polypoid degeneration exists.

Dr. Hastings: I was very much interested in both papers. I had almost formed the opinion that puncture was all that was needed to make diagnosis, but I find in ethmoid and sphenoid work stereoscopic radiography has been very satisfactory and is the coming method. In the ethmoid it will show how wide and how deep the ethmoid labyrinth is for operating. We are greatly indebted to Dr. Selfridge and Dr. Cambert for coming here to demonstrate these valuable methods to us.

Dr. Stivers: How young can children be operated on?

Dr. Selfridge stated, in answering, that it was necessary to preserve the triangular cartilage in children, so he removes very little except when it is thickened high up in the ethmoid region. After 7 years of age, he makes the usual incision on one side, separates all the mucous membrane and tissues down to the bone and removes the excess of cartilage. Dislocation of the columnar cartilage is treated the same as in adults.

Dr. Selfridge, in closing, said if he lived long enough he wanted to come again and give a talk on hay-fever, which is a hobby of his. He has recently, with Dr. Scheppergrell and Dr. Hall, been tabulating the various weeds and Compositae of California.

Dr. Edward G. Cambert, Roentgenologist of the Southern Pacific General Hospital of San Francisco, gave an interesting talk on stereoscopic X-ray pictures. He showed many interesting views of the sinuses.

The society extended a rising vote of thanks to the visitors.

Dr. Hosmer, of San Diego, was elected an associate member.

The secretary requested members to notify him by letter the exact wording of their specialty for the coming new list of members to be printed in the Constitution and By-Laws which are now being written.

Meeting adjourned for refreshments.

C. G. STIVERS, M. D., Secretary.

LANE LECTURES.

January 12, 1917.—"What Every One Should Know About Cancer." Dr. Harry M. Sherman, representing the American Society for the Control of Cancer.

January 26, 1917.—"Modern Efforts to Secure Painless Childbirth." Dr. Frank W. Lynch, Pro-fessor of Obstetrics and Gynecology, University of California.

of California.

February 9, 1917.—"Poliomyelitis." Dr. William C. Hassler, Health Officer of San Francisco.
February 23, 1917.—"The Importance of Proper Habits of Carriage as a Basis of Health." Illustrated. Dr. Harry L. Langnecker.

March 9, 1917.—"The Problem of Race and Race Prejudice." Prof. Arthur W. Meyer, Department of Anatomy.

of Anatomy.

March 23, 1917.—"Prevention of Blindness." Illustrated. Dr. Hans Barkan.

REPORT OF THE MEETING OF THE STATE BOARD OF HEALTH FOR DECEM-BER, 1916.

The State Board of Health held its regular monthly meeting in Sacramento on December 2, 1916. There were present Dr. George E. Ebright, President, and Doctors F. F. Gundrum, Edward F. Glaser and Wilbur A. Sawyer.

Regulations for the prevention of scarlet fever were considered, amended and adopted. They will be published in the December Monthly Bulletin

of the State Board of Health.

The action of the Secretary in removing the rabies quarantine on Lassen County on the basis of the investigation of Sanitary Inspector Ross was approved. The quarantine on Modoc County was allowed to remain, as rabies was still present.

A hearing was given to a physician who had been cited to appear and show cause why he should not be prosecuted for violation of the State Vaccination Act. He had been charged with issuing a certificate of successful vaccination to a student, whereas in fact he had not vaccinated him against smallpox with vaccine prepared under United States Government or State of California license, as required by the State Vaccination Act. The physician plead in his defense that he had been ignorant of the requirements of the act, that he had "vaccinated" him by the administration of pills of "variolinum," thinking this would give immunity, and that in future he would use only methods complying with the law. Of interest in the case was the evidence that the student, soon after taking the pills, had been vaccinated against smallpox with a resulting primary vaccinia, showing that no immunity had been produced by the so-called "internal vaccination." After carefully weighing the evidence the Board dismissed the case with a warning.

A report of the committee on the need for a psychopathic hospital was presented by Dr. George E. Ebright. The committee recommended that legislation be initiated providing for an appropriation of \$500,000 for the building and equipment of a research psychopathic hospital, to be under the control and charge of the Board of Regents of the University of California. The committee favored also the establishment of a State industrial farm for the care and treatment of inebriates and drug addicts.

The temporary permit of the West San Joaquin Valley Water Company to furnish water to the people of Los Banos was revoked, as it was shown that the company had not met the condidangerously polluted water. The Board ordered that legal proceedings be initiated to compel compliance with the requirements.

A women's ward of 23 beds in the Tuberculosis Department of the Los Angeles County Hospital